**Fax**

<b>Attention:</b>	Mail Stop ISSUE FEE	<b>From:</b>	Travis Dodd
<b>Fax:</b>	(571) 273-2885	<b>Fax:</b>	(818) 833-2065
<b>Examiner's Phone:</b>		<b>Phone:</b>	(818) 833-2014
<b>Company:</b>	United States Patent and Trademark Office	<b>Company:</b>	Quallion LLC
<b>Re:</b>	Application Serial No. 10/666,660 Filing Date: September 17, 2003 Confirmation No. 8449 Inventor(s): TSUKAMOTO, Hisashi et al. Examiner: LEE, Cynthia Group Art Unit: 1795 for ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE Our File No. Q137-US3	<b>Pages:</b>	5
		<b>Date:</b>	December 13, 2010

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- Transmittal of Payment of Issue Fee (Small Entity) (1 page)
- Fee Transmittal (1 page)
- PTOL-85 (Rev. 11/03) Part B. - Fee(s) Transmittal (1 page)
- Form PTO-2038, credit card authorization (1 page)

Lisa K. Robbins

(Name of Person Signing Certificate)

  
(Signature)

**Quallion LLC**

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/666,860
		Filing Date	September 17, 2003
		First Named Inventor	Tsukamoto, Hiaashi et al.
		Group Art Unit	1795
		Examiner Name	LEE, Cynthia
Total Number of Pages in This Submission		Attorney Docket Number	Q137-US3

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized Amendment After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Issue Fee Transmittal
Remarks		


Customer Number or Bar Code Label	31815 <i>(insert Customer No. or Attach bar code label here)</i>
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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0821. A duplicate copy of this sheet is enclosed.

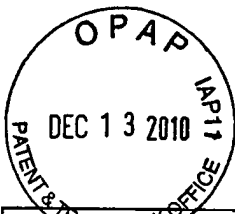
Respectfully submitted,

Dated: 12/13/2010

Phone: (818) 833-2003  
Fax: (818) 833-2065

By:   
 Travis Dodd  
 Attorneys for Applicant(s)  
 P.O. Box 923127  
 Sylmar, CA 91392-3127

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____			
Typed or printed name	TRAVIS DODD		
Signature		Date	

**FEE TRANSMITTAL**

Attorney/Agent No.	Q137-US3
First Named Inventor:	TSUKAMOTO, Hisashi et al.
Application Number	10/666,860
Filing Date:	September 17, 2003
Examiner Name:	Cynthia Lee
Group/Art Unit:	1795

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 755.00</b>
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:  Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card

**2. UTILITY Basic Filing Fee & Claims**

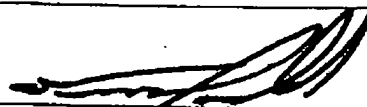
(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$330.00	\$165.00	\$0.00
Total Claims	16-20=	0	X \$52.00	X \$26.00	\$0.00
Independent Claims	1-3=	0	X \$220.00	X \$110.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$390.00	\$195.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$0.00
Reissue filing fee	\$330.00	\$165.00	\$0.00
Provisional filing fee	\$220.00	\$110.00	\$0.00
Total of above Calculations =			\$0.00

**3. ADDITIONAL FEES**

Fee Description	Large Entity	Small Entity	Other
Issue Fee	\$	\$755.00	\$755.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$755.00

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	12/13/2010